

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.C.D.		7/21/99
O.I.P.E. CLASSIFIER			7-26-99
FORMALITY REVIEW			8-10-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/21/99
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18	✓	✓	7/21/99
19	✓	✓	7/21/99
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36	✓	✓	7/21/99
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If more than 150 claims or 10 actions  
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